

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET		CLAIMS	
APPLICANT(S)		CLAIMS	
SERIAL NO.	FILING DATE	CLAIMS	
1		AS FILED	1
2		DEP	2
3		DEP	3
4		DEP	4
5		DEP	5
6		DEP	6
7		DEP	7
8		DEP	8
9		DEP	9
10		DEP	10
11		DEP	11
12		DEP	12
13		DEP	13
14		DEP	14
15		DEP	15
16		DEP	16
17		DEP	17
18		DEP	18
19		DEP	19
20		DEP	20
21		DEP	21
22		DEP	22
23		DEP	23
24		DEP	24
25		DEP	25
26		DEP	26
27		DEP	27
28		DEP	28
29		DEP	29
30		DEP	30
31		DEP	31
32		DEP	32
33		DEP	33
34		DEP	34
35		DEP	35
36		DEP	36
37		DEP	37
38		DEP	38
39		DEP	39
40		DEP	40
41		DEP	41
42		DEP	42
43		DEP	43
44		DEP	44
45		DEP	45
46		DEP	46
47		DEP	47
48		DEP	48
49		DEP	49
50		DEP	50
TOTAL DEP.		TOTAL DEP.	
TOTAL NO.		TOTAL NO.	
TOTAL CLAIMS		TOTAL CLAIMS	

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO.	FILING DATE	
							APPLICANT(S)		
CLAIMS									
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT				
	IND	DEP	IND	DEP	IND	DEP		IND	DEP
101		1					51		
2		1					52		
3		1					53		
4		1					54		
5	1						55		
6		1					56		
7		1					57		
8		1					58		
9		1					59		
10		1					60		
11		1					61		
12		1					62		
13		1					63		
14		1					64		
15							65		
16							66		
17							67		
18							68		
19							69		
20							70		
21							71		
22							72		
23							73		
24							74		
25							75		
26							76		
27							77		
28							78		
29							79		
30							80		
31							81		
32							82		
33							83		
34							84		
35							85		
36							86		
37							87		
38							88		
39							89		
40							90		
41							91		
42							92		
43							93		
44							94		
45							95		
46							96		
47							97		
48							98		
49							99		
50							100		
TOTAL IND.	5						TOTAL IND.		
TOTAL DEP.	43						TOTAL DEP.		
TOTAL CLAIMS	48						TOTAL CLAIMS		